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Bib Data Sheet

SERIAL NUMBER 10/796,224	FILING OR 371(c) DATE 03/09/2004 RULE	CLASS 206	GROUP ART UNIT 3728	ATTORNEY DOCKET NO. 040094
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APPLICANTS

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LWB

**** CONTINUING DATA *******

This appln claims benefit of 60/453,297 03/10/2003

**** FOREIGN APPLICATIONS *******
IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

05/27/2004

** SMALL ENTITY **

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY PA	SHEETS DRAWING 11	TOTAL CLAIMS 50	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <i>LWB</i> Initials				

ADDRESS

23464

TITLE

Medication package and method

FILING FEE RECEIVED 655	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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